

| <b>ORDER FOR SUPPLIES OR SERVICES</b>   |  |  |                                     |                              |  |   |   |                      |  | PAGE 1 OF 9   |  |   |  |
|---|--|--|-------------------------------------|------------------------------|--|---|---|----------------------|--|---|--|---|--|
| 1. CONTRACT/PURCH. ORDER/<br>AGREEMENT NO.<br>N66001-16-D-0033  |  |  | 2. DELIVERY ORDER/ CALL NO.<br>0016 |                              | 3. DATE OF ORDER/CALL<br>(YYYYMMDD)<br>2016 Dec 01   |   | 4. REQ./ PURCH. REQUEST NO.<br>1300608118   |                      |  | 5. PRIORITY   |  |   |  |
| 6. ISSUED BY<br>SPAWAR SYSTEMS CENTER PACIFIC<br>EMILY L. BEDNASH, CODE 22410<br>EMILY.L.BEDNASH@NAVY.MIL<br>53560 HULL STREET<br>SAN DIEGO CA 92152-5001   |  |  | CODE N66001                         |                              | 7. ADMINISTERED BY (if other than 6)<br>DCMA SOUTHERN VIRGINIA<br>2000 ENTERPRISE PARKWAY SUITE 200<br>HAMPTON VA 23666                  |   |   | CODE S5111A          |  |   |  | 8. DELIVERY FOB<br><input checked="" type="checkbox"/> DESTINATION<br><input type="checkbox"/> OTHER<br><br>(See Schedule if other) |  |
| 9. CONTRACTOR<br>SERCO INC.<br>DUNS #928859149<br>1818 LIBRARY ST STE 1000<br>RESTON VA 20190-6276  |  |  | CODE 022Q2                          |                              | FACILITY   |   | 10. DELIVER TO FOB POINT BY (Date)<br>(YYYYMMDD)<br><b>SEE SCHEDULE</b>   |                      |  | 11. MARK IF BUSINESS IS<br><input type="checkbox"/> SMALL<br><input type="checkbox"/> SMALL DISADVANTAGED<br><input type="checkbox"/> WOMEN-OWNED |  |   |  |
|   |  |  |                                     |                              |  |   | 12. DISCOUNT TERMS<br>Net 30 days   |                      |  |   |  |   |  |
|   |  |  |                                     |                              |  |   | 13. MAIL INVOICES TO THE ADDRESS IN BLOCK<br>See Item 15  |                      |  |   |  |   |  |
| 14. SHIP TO<br>SPAWAR SYSTEMS CENTER<br>RECEIVING OFFICER<br>4297 PACIFIC HWY, BLDG OT7<br>SAN DIEGO CA 92110   |  |  | CODE N69255                         |                              | 15. PAYMENT WILL BE MADE BY<br>DFAS COLUMBUS CENTER<br>DFAS-CO/SOUTH ENTITLEMENT OPERATIONS<br>P.O. BOX 182264<br>COLUMBUS OH 43218-2264 |   |   | CODE HQ0338          |  | <b>MARK ALL<br/>PACKAGES AND<br/>PAPERS WITH<br/>IDENTIFICATION<br/>NUMBERS IN<br/>BLOCKS 1 AND 2.</b>  |  |   |  |
| 16. TYPE OF ORDER   |  |  | DELIVERY/ CALL                      |                              | X  |   | This delivery order/call is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered contract. |                      |  |   |  |   |  |
| PURCHASE  |  |  |                                     |                              |  |   | Reference your quote dated  |                      |  | Furnish the following on terms specified herein. REF:   |  |   |  |
| ACCEPTANCE. THE CONTRACTOR HEREBY ACCEPTS THE OFFER REPRESENTED BY THE NUMBERED PURCHASE ORDER AS IT MAY PREVIOUSLY HAVE BEEN OR IS NOW MODIFIED, SUBJECT TO ALL OF THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME. |  |  |                                     |                              |  |   |   |                      |  |   |  |   |  |
| NAME OF CONTRACTOR  |  |  |                                     | SIGNATURE                    |  |   |   | TYPED NAME AND TITLE |  |   |  | DATE SIGNED<br>(YYYYMMDD)   |  |
| <input type="checkbox"/> If this box is marked, supplier must sign Acceptance and return the following number of copies:  |  |  |                                     |                              |  |   |   |                      |  |   |  |   |  |
| 17. ACCOUNTING AND APPROPRIATION DATA/ LOCAL USE  |  |  |                                     |                              |  |   |   |                      |  |   |  |   |  |
| See Schedule  |  |  |                                     |                              |  |   |   |                      |  |   |  |   |  |
| 18. ITEM NO.  |  | 19. SCHEDULE OF SUPPLIES/ SERVICES           |                                     |                              |  | 20. QUANTITY ORDERED/ ACCEPTED*   |   | 21. UNIT             |  | 22. UNIT PRICE  |  | 23. AMOUNT  |  |
|   |  | SEE SCHEDULE                                 |                                     |                              |  |   |   |                      |  |   |  |   |  |
| * If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle.  |  |  |                                     |                              |  | 24. UNITED STATES OF AMERICA<br>TEL: 619-553-4482<br>EMAIL: richard.hammersmith@navy.mil<br>BY: Richard Hammersmith |   |                      |  | (b)(6)  |  | 25. TOTAL \$326,289.73  |  |
| 27a. QUANTITY IN COLUMN 20 HAS BEEN   |  |  |                                     |                              |  | 26. DIFFERENCES   |   |                      |  |   |  |   |  |
| <input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO THE CONTRACT EXCEPT AS NOTED  |  |  |                                     |                              |  | 27b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE  |   |                      |  | 27c. DATE (YYYYMMDD)  |  | 27d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE   |  |
| e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE  |  |  |                                     |                              |  | 28. SHIP NO.  |   | 29. DO VOUCHER NO.   |  | 30. INITIALS  |  |   |  |
| f. TELEPHONE NUMBER   |  |  | g. E-MAIL ADDRESS                   |                              |  | <input type="checkbox"/> PARTIAL<br><input type="checkbox"/> FINAL  |   | 32. PAID BY          |  | 33. AMOUNT VERIFIED CORRECT FOR   |  |   |  |
| 36. I certify this account is correct and proper for payment.   |  |  |                                     |                              |  | 31. PAYMENT   |   |                      |  | 34. CHECK NUMBER  |  |   |  |
| a. DATE (YYYYMMDD)  |  | b. SIGNATURE AND TITLE OF CERTIFYING OFFICER |                                     |                              |  | <input type="checkbox"/> COMPLETE<br><input type="checkbox"/> PARTIAL<br><input type="checkbox"/> FINAL             |   |                      |  | 35. BILL OF LADING NO.  |  |   |  |
| 37. RECEIVED AT   |  | 38. RECEIVED BY                              |                                     | 39. DATE RECEIVED (YYYYMMDD) |  | 40. TOTAL CONTAINERS  |   | 41. S/R ACCOUNT NO.  |  | 42. S/R VOUCHER NO.   |  |   |  |

## Section B - Supplies or Services and Prices

| ITEM NO                     | SUPPLIES/SERVICES  | QUANTITY | UNIT | UNIT PRICE           | AMOUNT    |
|-----------------------------|--|----------|------|----------------------|-----------|
| 0004<br>EXERCISED<br>OPTION | Production Mgt and Fab Services Option 1<br>CPFF<br>The contractor shall provide engineering and technical support for Space and Naval Warfare (SPAWAR Systems Center Pacific (SSCPAC) Code 4125 for:<br>The contractor shall provide for the fabrication and integration support services to produce ORT Data Storage, Router, and Server Installation Kits.<br>This is a Performance Based Service Acquisition, NON-SEVERABLE – COMPLETION type task order.<br>Labor Hours are (b)(4) Hours (in which (b)(4) are subcontractors combined)<br><br>FOB: Destination<br>PURCHASE REQUEST NUMBER: 1300608118 | 1        | Lot  |                      | \$ (b)(4) |
|                             |  |          |      | ESTIMATED COST       | \$ (b)(4) |
|                             |  |          |      | FIXED FEE            | \$ (b)(4) |
|                             |  |          |      | TOTAL EST COST + FEE | \$ (b)(4) |
|                             | ACRN AA<br>CIN: 130060811800001  |          |      |                      | \$ (b)(4) |

| ITEM NO                     | SUPPLIES/SERVICES   | QUANTITY | UNIT | UNIT PRICE           | AMOUNT |
|-----------------------------|---|----------|------|----------------------|--------|
| 0005<br>EXERCISED<br>OPTION | NSP CDRL - in Support of CLIN 0004<br>CPFF<br>Contract Data Requirements List (CDRL) as specified in individual task orders.<br>FOB: Destination<br>PURCHASE REQUEST NUMBER: 1300608118 |          | Lot  |                      | NSP    |
|                             |   |          |      | ESTIMATED COST       | \$0.00 |
|                             |   |          |      | FIXED FEE            | \$0.00 |
|                             |   |          |      | TOTAL EST COST + FEE | \$0.00 |

| ITEM NO             | SUPPLIES/SERVICES   | QUANTITY | UNIT | UNIT PRICE           | AMOUNT    |
|---------------------|---|----------|------|----------------------|-----------|
| 0006                |   | 1        | Lot  |                      | \$ (b)(4) |
| EXERCISED<br>OPTION | Material - Option 1<br>CPFF<br>Material in support of Performance Work Statement in Section C, as identified<br>in individual task orders.<br>FOB: Destination<br>PURCHASE REQUEST NUMBER: 1300608118 |          |      |                      |           |
|                     |   |          |      | ESTIMATED COST       | \$ (b)(4) |
|                     |   |          |      | FIXED FEE            | \$ (b)(4) |
|                     |   |          |      | TOTAL EST COST + FEE | \$ (b)(4) |
|                     | ACRN AA   |          |      |                      | \$ (b)(4) |
|                     | CIN: 130060811800002  |          |      |                      |           |

## Section C - Descriptions and Specifications

EIT**EXEMPTION FROM ELECTRONIC AND INFORMATION TECHNOLOGY ACCESSIBILITY REQUIREMENTS (JUN 2001)**

(a) The Government has determined that the following exemption(s) to the Electronic and Information Technology (EIT) Accessibility Standards (36 C.F.R. § 1194) are applicable to this procurement:

- ☒ X The EIT to be provided under this contract has been designated as a National Security System.
- ☐ The EIT acquired by the contractor is incidental to this contract.
- ☐ The EIT to be provided under this contract would require a fundamental alteration in the nature of the product or its components in order to comply with the EIT Accessibility Standards.
- ☐ The EIT to be provided under this contract will be located in spaces frequented only by service personnel for maintenance, repair, or occasional monitoring of equipment.
- ☐ Compliance with the EIT Accessibility Standards would impose an undue burden on the agency.
- ☐ The EIT to be provided under this contract is purchased in accordance with FAR Subpart 13.2 prior to January 1, 2003.

(b) Notwithstanding that an exemption exists, the Contractor may furnish supplies or services provided under this contract that comply with the EIT Accessibility Standards (36 C.F.R. § 1194).

## Section E - Inspection and Acceptance

## INSPECTION AND ACCEPTANCE TERMS

Supplies/services will be inspected/accepted at:

| CLIN | INSPECT AT  | INSPECT BY | ACCEPT AT   | ACCEPT BY  |
|------|-------------|------------|-------------|------------|
| 0004 | Destination | Government | Destination | Government |
| 0005 | Destination | Government | Destination | Government |
| 0006 | Destination | Government | Destination | Government |

## Section F - Deliveries or Performance

## DELIVERY INFORMATION

| CLIN | DELIVERY DATE                     | QUANTITY | SHIP TO ADDRESS  | DODAAC |
|------|-----------------------------------|----------|--|--------|
| 0004 | POP 01-DEC-2016 TO<br>31-DEC-2017 | N/A      | SPAWAR SYSTEMS CENTER<br>RECEIVING OFFICER<br>4297 PACIFIC HWY, BLDG OT7<br>SAN DIEGO CA 92110<br>(619) 524-2271<br>FOB: Destination | N69255 |
| 0005 | POP 01-DEC-2016 TO<br>31-DEC-2017 | N/A      | (SAME AS PREVIOUS LOCATION)<br>FOB: Destination  | N69255 |
| 0006 | POP 01-DEC-2016 TO<br>31-DEC-2017 | N/A      | (SAME AS PREVIOUS LOCATION)<br>FOB: Destination  | N69255 |

## Section G - Contract Administration Data

## CLAUSES INCORPORATED BY REFERENCE

|              |   |          |
|--------------|---|----------|
| 252.232-7006 | Wide Area WorkFlow Payment Instructions | MAY 2013 |
| 252.204-0001 | Line Item Specific: Single Funding      | SEP 2009 |

## CLAUSES INCORPORATED BY FULL TEXT

**5252.201-9201 DESIGNATION OF CONTRACTING OFFICER'S REPRESENTATIVE (MAR 2006)**

(a) The Contracting Officer hereby appoints the following individual as Contracting Officer's Representative(s) (COR) for this contract/order:

CONTRACTING OFFICER REPRESENTATIVE

Name: (b)(6)  
Code: 42150  
Address: SSC PACIFIC

Phone Number: 619-524-3214

E-mail: (b)(6)

(b) It is emphasized that only the Contracting Officer has the authority to modify the terms of the contract, therefore, in no event will any understanding agreement, modification, change order, or other matter deviating from the terms of the basic contract between the Contractor and any other person be effective or binding on the Government. When/If, in the opinion of the Contractor, an effort outside the existing scope of the contract is requested, the Contractor shall promptly notify the PCO in writing. No action shall be taken by the Contractor unless the Procuring Contracting Officer (PCO) or the Administrative Contracting Officer (ACO) has issued a contractual change.

(End of clause)

**5252.216-9200 PAYMENT OF FIXED FEE (COMPLETION TYPE) (JAN 1989)**

FIXED FEE: CLIN 0004: \$ (b)(4) / CLIN 0006: \$ (b)(4) The Government shall make payment to the Contractor when requested as work progresses, but no more frequently than biweekly, on account of the fixed fee, equal to CLIN 0004:(b)(4)/ CLIN 0006:(b)(4) of the amounts invoiced by the Contractor under the "Allowable Cost and Payment" clause hereof for the related period, subject to the withholding provisions of paragraph (b) of the "Fixed Fee" clause. In the event of discontinuance of the work in accordance with clause of this contract entitled "Limitation of Funds" the fixed fee shall be redetermined by mutual agreement equitably to reflect the diminution of the work performed; the amount by which such fixed fee is less than, or exceeds payments previously made on account of fee, shall be paid, or repaid by, the Contractor, as the case may be.

(End of clause)

**ENTERPRISE CONTRACTOR MANPOWER REPORTING APPLICATION (ECMRA)**

The contractor shall report contractor labor hours (including subcontractor labor hours) required for performance of services provided under this contract for the Space and Naval Warfare Systems Center Pacific via a secure data collection site. Contracted services excluded from reporting are based on Product Service Codes (PSCs). The excluded PSCs are:

- (1) W, Lease/Rental of Equipment;
- (2) X, Lease/Rental of Facilities;
- (3) Y, Construction of Structures and Facilities;
- (4) D, Automatic Data Processing and Telecommunications, IT and Telecom- Telecommunications Transmission (D304) and Internet (D322) ONLY;
- (5) S, Utilities ONLY;
- (6) V, Freight and Shipping ONLY.

The contractor is required to completely fill in all required data fields using the following web address <https://doncmra.nmci.navy.mil>.

Reporting inputs will be for the labor executed during the period of performance during each Government fiscal year (FY), which runs October 1 through September 30. While inputs may be reported any time during the FY, all data shall be reported no later than October 31 of each calendar year. Contractors may direct questions to the help desk, linked at <https://doncmra.nmci.navy.mil>.

For purposes of ECMRA reporting, The Federal Supply Code/Product Service Code applicable to this contract/order is R425.

**ACCOUNTING AND APPROPRIATION DATA**

AA: 1771810 M2PQ 310 00039 0 050120 2D 000000

COST CODE: A00003711801

AMOUNT: \$326,289.73

CIN 130060811800001: \$ (b)(4)

CIN 130060811800002: \$ (b)(4)



## Section J - List of Documents, Exhibits and Other Attachments

## Exhibit/Attachment Table of Contents

| DOCUMENT TYPE | DESCRIPTION | PAGES | DATE        |
|---------------|-------------|-------|-------------|
| Attachment 1  | PWS         | 4     | 12-SEP-2016 |
| Attachment 2  | PRS         | 2     | 01-DEC-2016 |
| Attachment 3  | CDRLs       | 2     | 01-DEC-2016 |